Life PBR Statement of Exemption

For Insurers Domiciled in Kentucky

To be filed before July 1

An insurer domiciled in Kentucky planning to elect the Life Principle-Based Reserving (PBR) Exemption for policies issued or assumed in the current calendar year must file this Statement of Exemption with the Commissioner no later than June 30th of the current calendar year. The Statement of Exemption must also be included with the NAIC Quarterly Financial Statement filing for the second quarter of the calendar year. Exemption requirements are found in Section II, Subsection 1.D of the Valuation Manual. Please complete the following information and submit this Statement of Exemption by email to The Kentucky Department of Insurance, Rodney Hugle, at Rodney.hugle@ky.gov.

Reminder: An exemption applies only to policies issued or assumed in the calendar year of the approval, and it applies to all future valuation dates for those policies. Statements of Exemption must be filed for each calendar year on or after 2020 if the company plans to elect the Life PBR Exemption for policies issued or assumed in that calendar year.

Company Information:				
Year for which the statement of exemption applies NAIC # NAIC Group #				
Company Name				_
Address				_
City	State	Zip		_
Contact information for	individual signing statement:	:		
Name		Phone		
Email				
Policies Covered by th	is Statement:			
□All policies issued or ass	sumed in the current calendar y	ear that would oth	erwise be subject to VM-20.	
☐All policies issued or ass	sumed in the current calendar y	ear that would oth	erwise be subject to VM-20,	
excluding				

Information required for KY Department of Insurance to consider the Life PBR Exemption:

		Individual Company	Group
(A)	Direct plus assumed from unaffiliated companies		
	ordinary life premium as reported in Exhibit 1 Part		
	1, Column 3 in the prior year annual statement		
(B)	Confirm the year of the annual statement for		
	reconciling the amounts reported in (A)		
(C)	Portion of (A) that is for guaranteed issue policies		
	Portion of (A) that is for preneed life contracts		
(E)	Portion of (A) that represent the transfer of		
	reserves in force as of the effective date of a		
	reinsurance assumed transaction (not including		
	those related to (C) or (D) above)		
(F)	Premium amount used for consideration under		
	Section II, subsection 1.D.2.a, $F = A - C - D - E$		
(G)	Confirmation that amount in (F) is less than		
	\$300M (Individual Company) and \$600M		
	(Group) (Yes/No)		
(H)	Estimated # of ULSG policies issued or assumed in		
, ,	the current calendar year where the secondary		
	guarantee fails to meet the VM-01 definition of a		
	"non-material secondary guarantee"		
(I)	Confirmation that policies in (H) are excluded		
	from this Statement of Exemption (Yes/No or		
	N/A if (H) is 0)		
of the <i>V</i> policies	cies covered by this statement satisfy the Life Planta in Manual for the current calendar year. Subject to the exemption are those pursuant to tality as defined in VM-20 Section 3.C.1 and VM	The minimum reserve requon applicable methods requires	irements for the ordinary life
• .	icies issued or assumed in the current calendar covered by this statement of exemption will be	•	•
Γhe info	rmation contained herein is true and correct to	the best of my knowledge a	and belief.
	Name and Title	Signature	 Date